

Foster Family Home - Corrective Action Report

Provider ID: 1-130035

Home Name: Ricky Mericle, CNA

Review ID: 1-130035-9

91-802 Haiamu Street

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 4/16/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Recertification inspection conducted for this CCFFH. Home met all compliance requirements as determined during Covid-19 criteria at the time of the home inspection. No corrective action required

Jackie Chamberlain RN
Compliance Manager

[Signature]
Primary Care Giver

4/16/2020
Date

4/16/2020
Date